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DATE: Friday, April 28, 2006 10:09:30 AM TIME IN: 10:09:30 AM  
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TO:

USPTO	1-571-273-8300	

FROM: Sharon Farnus PHONE: 714-427-7054  
MESSAGE:

RE: 09/936,157  
Attorney Docket: 42478-8700  
  
Please enter attached Response.  
  
Kindly confirm receipt via return fax.  
  
Thank you.

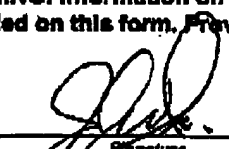
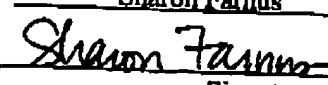
ORIGINAL DOCUMENT: Will not be sent NUMBER OF PAGES (Including Cover): 22  
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<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>					Docket No. 42478-8700	
Applicant(s): Osamu Shibata et al.						
Application No. 09/936,157	Filing Date September 6, 2001	Examiner Moorthy, Aravind K.	Customer No. 21611	Group Art Unit 2131	Confirmation No. 9192	
Invention: <b>AUTHENTICATION COMMUNICATION APPARATUS AND AUTHENTICATION COMMUNICATION SYSTEM</b>						
<b>COMMISSIONER FOR PATENTS:</b>						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
<b>CLAIMS AS AMENDED</b>						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	27	27	0	x \$50.00	\$0.00	
INDEP. CLAIMS	8	8	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. 19-2814 in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 19-2814 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.18. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>						
 Joseph W. Price Reg. 25,124 Snell & Wilmer LLP 600 Anton Boulevard, Suite 1400 Costa Mesa, CA 92626 Tel: 714-427-7420 Fax: 714-427-7799			Dated: April 28, 2006  I hereby certify that this correspondence is being transmitted via facsimile to the USPTO at 571-273-8300 on <u>4-28-06</u> . By: <u>Sharon Farnus</u>  Signature Dated: <u>4-28-06</u>			
cc:						

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Patent  
42478-8700

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of:

OSAMU SHIBATA et al.

Serial No.: 09/936,157

Filed: September 6, 2001

For: AUTHENTICATION  
COMMUNICATION APPARATUS  
AND AUTHENTICATION  
COMMUNICATION SYSTEM

Patent Examiner: Moorthy, Aravind K.

Group Art Unit: 2131

April 28, 2006

Costa Mesa, California 92626

**RESPONSE TO OFFICE ACTION**

**VIA FACSIMILE**  
**571-273-8300**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action of January 31, 2006, please amend the above-identified application as follows: